

Request for Appeal Hearing

OEO Office Use Only
Case #

NOTE: Persons with disabilities may request this information be prepared and supplied in alternate formats by calling 360-705-7095. Persons with hearing impairments may call 1-800-833-6388 (Washington State Telecommunications Relay Service), Tele-Braille at 1-800-833-6385, or Voice at 1-800-833-6384, and ask to be connected to 360-705-7097.

Name Home Address			Job Title		
			Home Phone	Work Phone	
Regardir	ng:				
	1.	All information available was not considered. (Please descaffect the outcome):	ot considered. (Please describe what was not considered and why it would		
	2.	I do not believe this is an appropriate application of Depar why you believe the conclusion was erroneous):	tmental policy and proce	dures. (Please describe	
	3.	Additional Comments:			

Submit this form to the Secretary of Transportation, Transportation Building, PO Box 47316, Olympia, WA 98504-7316.

After review of your request, you will be informed if an appeal hearing is scheduled. At the appeal hearing, you may personally present your concerns to the oversight Equal Opportunity Committee.

Chapter 3 of the Equal Opportunity Desk Manual outlines the appeal hearing process and membership of the Equal Opportunity Committee.